

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

IN RE APPLICATION OF: Brunotte et al.

CASE:

OST-031201

RESPONSE TO

SER. NO.:

10/714,573

OFFICE ACTION

FILING DATE:

November 14, 2003

FOR:

PROJECTION LENS AND

MICROLITHOGRAPHIC PROJECTION

EXPOSURE APPARATUS

COMMISSIONER FOR PATENTS P.O. Box 1450 ATTENTION OF:

Alexandria, VA 22313-1450

EXAMINER:

Dear Sir:

If any charges or fees must be paid in connection with the following communication, they may be paid out of our Deposit Account No. 50-0545.

This is in response to the Office Action mailed on June 7, 2004. Please consider the

following remarks towards reconsideration and allowance of the present application.

Adjustment date: 11/02/2004 SDIRETA1 09/27/2004 TOKON1 00000011 500545 10714573 01 FC:1202 36.00 CR

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Jody L. Factor 34157 FACTOR & LAKE, LTD. 1327 W. Washington Blvd, Suite 5G/H Micheal D. Lake 33727 Jacob D. Koering 51890 Chicago, IL 60607 William J. Lenz 44208 (312) 226-1818 Telephone 45743 Joseph M. Kinsella (312) 226-1919 Facsimile 54260 Nick S. Lee

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IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

RE APPLICATION OF: Brimotte et al.

CASE:

OST-031201

SERIAL NO.:

10/714,573

REQUEST FOR

FILED ON:

November 14, 2003

REFUND

FOR:

ENOJECTION LENS AND ROLITHOGRAPHIC **ROJECTION EXPOSURE APPARATUS**

COMMISSIONER FOR PATENTS P.O. Box 1450 Alexandria, VA 22313-1450

ATTENTION OF:

EXAMINER:

Dear Sir:

If any charges or fees must be paid in connection with the following communication, they may be paid out of our Deposit Account No. 50-0545.

Applicant hereby requests a refund in the amount of \$36.00 for the above-identified application.

FACTOR & LAKE, LTD. 1327 W. Washington Blvd., Suite 5 G/H Chicago, IL 60607 (312) 226-1818 (312) 226-1919 (fax)

Jacob D. Koering William J. Lenz

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In a routine check of Applicant's Attorney's deposit account, Applicant's Attorney noticed an unanticipated charge withdrawn on September 27, 2004 in the amount of \$36.00 for Fee Code 1202 (additional claims over 20) in connection with the application assigned serial number 10/714,573. Inasmuch as our Response to the Office Action filed on September 7, 2004, did not include any additional claims than was originally filed, additional claim fees should not have been incurred.

In light of the foregoing, Applicant hereby respectfully requests a refund of the \$36.00 fee associated with serial number 10/714,573 in the form of a credit to Applicants Attorney's deposit account number 50-0545.

Should anything further be required, a telephone call to the undersigned at (312) 226-1818 is respectfully invited.

Respectfully submitted.

Dated: September 29, 2004

Attorney C. Pactor

one of Attorneys for Applicant

CERTIFICATE OF PACSIMILE TRANSMITTAL

I hereby certify that this correspondence is being transmitted via facsimile to the United States Patient and Trademark Office – Refund Branch at 703-308-5077 on September 29, 2004.

Jody L. Pactor

Name of Applicant, essignee, applicant's attorney or Registered Representative

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1327 W. Washington Blvd., Ste 5G/H Chlcago, lL 60607-1912 P: 312.226.1818 F: 312.226.1919

FACSIMILE TRANSMITTAL

DATE:

September 29, 2004

Please deliver the following pages to:

NAME(s):

USPTO Deposit Account Refund Dept.

Facsimile No.:

703-308-5077

From:

REMARKS:

Jody L. Factor

Total Number of Pages _____ (including this cover sheet)

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FACTOR & LAKE